

PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	PAT	ENT	APPLIC		FEE DETE	N	RECORD		Application or Docket Number				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	ENTITY	OR	OTHER THAN OR SMALL ENTITY		
FOR NUMBER FILED					NUMB	SER EXTRA		RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))									\$	OR		\$	
	AL CLAIMS CFR 1.16(c))			minus 20				x \$ =		OR	x \$=		
INDE	PENDENT CLAIM	us		minus 3	= •			× s =		OR	x \$=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+s =		OR	+\$ =		
* If the difference in column 1 is less than zero, enter *0* in column 2.								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED – PART II													
(Column 1) (Column 2) (Column 3						(Column 3)		SMALL E	NTITY	OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		REM Al	AIMS IAINING FTER NDMENT	•	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	•	37	Minus	" (PS)	=		x \$=		OR	x s =		
	Independent (37 CFR 1.16(b))	•	9	Minus	9	=		x \$=		OR	x \$=		
Ą	FIRST PRESENT	ATION C	F MULTIPLE	DEPENDE	ENT CLAIM (37 C		+ \$=		OR	+ \$=			
					,		TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Colu	ımn 1)		(Column 2)	(Column 3)							
AMENDMENT B		REM AF	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	. *		Minus	**	=		x \$=	ü	OR	x s =		
JEN.	Independent (37 CFR 1.16(b))	•		Minus	***	=		x \$=		OR	x \$=		
Ą	FIRST PRESENT	ATION O	F MULTIPLE	E DEPENDE	ENT CLAIM (37 C	FR 1.16(d))		+ s =		OR	+ \$=	··· -	
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
ENT C		REM AF	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total (37 CFR 1.16(c))	•		Minus	**	=		x \$=		OR	x \$=		
	Independent (37 CFR 1.16(b))	•		Minus	***	=		x s=		OR	x \$=		
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ s =		OR	+ s=		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 													

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999													
			FILED - olumn 1)		SMALL! TYPE		OR	OTHER					
FC	DR		NUMBE	R FILED NUMBER			EXTRA		RATE	FEE		RATE	FEE
8/	ISIC FEE		. 5							345.00	OR		690.00
TC	TAL CLAIMS		43	minus 2	20= ·	23		X\$ 9=		OR	X\$18=	414	
INC	DEPENDENT CL	AIMS	6	minus	3 = '	• 3			X39=		OR	X78=	234
MULTIPLE DEPENDENT CLAIM PRESENT									+130=	·	OR	+260=	
. 11	the difference i	mn 1 is l	less than ze		TOTAL		OR	TOTAL	1333				
	//_a	S AS A	MENDED	_ 0		<u> </u>	,	OTHER					
	H _	<u>ımn 1)</u>			SMALL	ENTITY	OR	SMALL	ENTITY				
ENT A		REM	AIMS AINING TER DMENT		PRE	IGHEST UMBER EVIOUSLY ND FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 3	7	Minus	•• .	43	=		X\$ 9=		OR	X\$18=	5
AME	Independent	•	6	Minus	***	<i>V</i>	- /		X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=		OR	+260=	
				6	TOTAL		OR	YOTAL					
	B	(Coh	ımn 1)		(Cc	olumn 2)	- 3- 0 (Column 3)	′	ADDIT, FEE		<i>(</i>)	ADDIT. FEE	
AMENDMENT'B		REM AF	AIMS AINING. TER IOMENT		H N PRI	IGHEST . RUMBER EVIOUSLY AID FOR	PRESENT EXTRA		"RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	. 6	37	Minus	••	43	=		X\$ 9=		OR	X\$18=	1
AME	Independent	•	6	Minus	•••	<i>پ</i>	-/		X39=		OR	X78=	
-	FIRST PRESE	MIAIR	N OF M	JULIPLE DE	PENUI	ENT CLAIN	0	•	+130=		OR	+260=	
		٠.	•			8/0	25704		TOTAL	 	OR	TOTAL	
	\mathcal{C}	/Cab	ma 41		ıcı	olu <u>mn 2)</u>	(Column 3)		ADDIT. FEE		,	ADDIT. FEE	
AMENDMENT C		CL REM A	AIMS AIMING TER IDMENT		H N PRI	RUMBER RUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	• • •	37 .	Minus	•• L	13	- ,	ŀ	X\$ 9=		OR	X\$18=	
AME	Independent	•	(0	Minus	••••	10	•/	.	X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=			+260=	
	If the entry in column 1 is less than the entry in column 2, write "O" in column 3.										OR	TOTAL	
"If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Proviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
<u> </u>	4 210-475											PAGENT C	

Application or Docket Number